
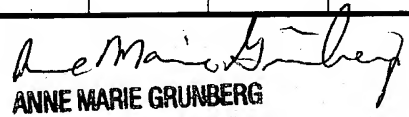
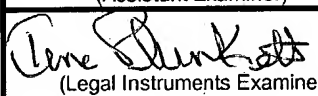


|  |                 |              |  |
|--|-----------------|--------------|--|
| <b>Issue Classification</b><br> | Application No. | Applicant(s) |  |
|  | 10/796,100      | LIM ET AL.CA |  |
|  | Examiner        | Art Unit     |  |
|  | Annette H. Para | 1661         |  |

| ISSUE CLASSIFICATION  |   |          |   |      |   |                                   |  |                             |                           |
|---|---|----------|---|------|---|-----------------------------------|--|-----------------------------|---------------------------|
| ORIGINAL  |   |          |   |      | CROSS REFERENCE(S)  |                                   |  |                             |                           |
| CLASS   |   | SUBCLASS |   |      | CLASS   | SUBCLASS (ONE SUBCLASS PER BLOCK) |  |                             |                           |
| PLT   |   | 102      |   |      |   |                                   |  |                             |                           |
| INTERNATIONAL CLASSIFICATION  |   |          |   |      |   |                                   |  |                             |                           |
| A   | 0 | 1        | H | 5/00 |   |                                   |  |                             |                           |
|   |   |          |   | /    |   |                                   |  |                             |                           |
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|   |   |          |   | /    |   |                                   |  |                             |                           |
| Annette H Para 11/01/2004<br>(Assistant Examiner) (Date)  |   |          |   |      | <br><b>ANNE MARIE GRUNBERG</b><br>PRIMARY EXAMINER<br>(Primary Examiner) |                                   |  | Total Claims Allowed: 1     |                           |
| <br>(Legal Instruments Examiner) (Date) |   |          |   |      |   |                                   |  | O.G.<br>Print Claim(s)<br>1 | O.G.<br>Print Fig.<br>N/A |

| <input checked="" type="checkbox"/> Claims renumbered in the same order as presented by applicant |          |       |          | <input type="checkbox"/> CPA |          | <input type="checkbox"/> T.D. |          | <input type="checkbox"/> R.1.47 |          |
|---|----------|-------|----------|------------------------------|----------|-------------------------------|----------|---------------------------------|----------|
| Final   | Original | Final | Original | Final                        | Original | Final                         | Original | Final                           | Original |
| 1   | 1        |       | 31       |                              | 61       |                               | 91       |                                 | 121      |
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